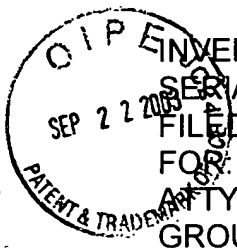


3763 \$



INVENTOR: Jeffrey T. Mason
SERIAL NO: 09/935,392
FILED: August 22, 2001
FOR: Medication Delivery System Having Selective Automated or Manual Discharge
PRIORITY DKT: 001P0001
GROUP ART UNIT: 3763
EXAMINER: R. Ghafoorian

**RESPONSE TRANSMITTAL AND
EXTENSION OF TIME REQUEST
(IF REQUIRED)**

RECEIVED

SEP 30 2003

COMMISSIONER FOR PATENTS
Washington, D.C. 20231
Sir:

TECHNOLOGY CENTER R3700

FEE CALCULATION FOR ENCLOSED RESPONSE and EXTENSION REQUEST (if any)									
	Claims Remaining		Highest No. Previously Paid		Number Extra		Rate		Additional Fee
Total Claims	22	-	24	=	0	×	\$18.00	=	0.00
Independent Claims	9	-	7	=	2	×	\$84.00	=	168.00
Surcharge For Multiple Dependent Claim First Added							\$280.00	=	0.00
[] Applicant requests a _____ extension of time for response to the outstanding Office Action. The fee is									0.00
[X] SMALL ENTITY STATUS (If applicable, divide TOTAL by 2)									84.00
[] Reduction for Extension Fee of ____ months already paid									0.00
[] OTHER:									0.00
TOTAL									84.00

The fees calculated above are to be charged to Deposit Account No. 02-4245.

If for some reason applicant has not requested a sufficient extension of time and/or has not paid a sufficient fee for this response and/or for the extension of time necessary to prevent the abandonment of this application, please consider this as a Request for an Extension for the required time period and/or an authorization to charge my Deposit Account No. 02-4245 for any fee which may be due. A duplicate copy of this sheet is enclosed.

Dated: September 16, 2003

By:

Rodney F. Brown
Attorney for Applicant
Registration No. 30,450

3365 Baltimore Street
San Diego, California 92117
Telephone: (858) 272-8705